

CREDIT HISTORY AUTHORIZATION FORM

The City of Alexandria Virginia, Fire Department utilizes many sources of information during the background investigation component of our employment process. Use of consumer credit reporting information is a very valuable tool and you should understand that this agency is required to obtain a separate and distinct authorization from you in order for this agency to obtain your consumer credit reporting history from a contracted consumer credit reporting agency. **Without this signed and executed authorization, we will be unable to process your application for employment with this agency.**

CREDIT AUTHORIZATION FOR RELEASE OF HISTORY INFORMATION

I do hereby authorize the City of Alexandria Virginia, Fire Department to review and obtain a full disclosure of all consumer credit history information and/or reports concerning myself for employment purposes only, whether said records are public or private, and including those which may be deemed to be of a privileged or confidential nature. I further understand that material contained in any of my consumer credit history reports may be a basis for the denial of employment with the City of Alexandria, Virginia, Fire Department.

Signature: _____ **Date:** _____

Print Name: _____ **Date of Birth:** _____

Social Security #: _____

To be completed by Notary:

County/City _____, *State of* _____

The foregoing instrument was acknowledged before me this _____ *day of* _____, 2010.

My commission expires _____.

NOTARY SIGNATURE: _____